

UTILITY PATENT APPLICATION TRANSMITTAL

(Only for new nonprovisional applications under 37 C.F.R. § 1.53(b))

Attorney Docket No.

100/09431

First Inventor or Application Identifier

Michael A. Spaid

Title

Microfluidic Viscomet r

Express Mail Label No.

EL544598935US

APPLICATION ELEMENTS

See MPEP chapter 600 concerning utility patent application contents.

ADDRESS TO:

MS Patent Application
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-145022278 U.S. PTO
10/728528

1. <input checked="" type="checkbox"/> *Fee Transmittal Form (e.g., PTO/SB/17) (Submit an original and a duplicate for fee processing)	7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)	
2. <input type="checkbox"/> Applicant claims small entity status See 37 CFR 1.27	8. <input type="checkbox"/> Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)	
3. <input checked="" type="checkbox"/> Specification (preferred arrangement set forth below) Total Pages 43	a. <input type="checkbox"/> Computer Readable Copy	
-Descriptive title of the invention	b. <input type="checkbox"/> Specification Sequence Listing on	
-Cross References to Related Applications	i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or	
-Statement Regarding Fed sponsored R&D	ii. <input type="checkbox"/> Paper	
-Reference to sequence listing, a table, or a computer program listing appendix	c. <input type="checkbox"/> Statement verifying identity of above copies	
-Background of the Invention	ACCOMPANYING APPLICATION PARTS	
-Brief Summary of the Invention	9. <input type="checkbox"/> Assignment Papers (cover sheet & document(s))	
-Brief Description of the Drawings (if filed)	10. <input checked="" type="checkbox"/> 37 C.F.R. §3.73(b) Statement (when there is an assignee) <input checked="" type="checkbox"/> Power of Attorney	
-Detailed Description	11. <input type="checkbox"/> English Translation Document (if applicable)	
-Claim(s)	12. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations()	
-Abstract of the Disclosure	13. <input type="checkbox"/> Preliminary Amendment	
4. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) Total Sheets 31	14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) (Should be specifically itemized)	
<input checked="" type="checkbox"/> Oath or Declaration Total Pages 3	15. <input type="checkbox"/> Certified Copy of Priority Document(s) (if foreign priority is claimed)	
a. <input type="checkbox"/> Newly executed (original or copy)	16. <input type="checkbox"/> Other	
b. <input type="checkbox"/> Unexecuted Oath or Declaration		
c. <input checked="" type="checkbox"/> Copy from a prior application (37 C.F.R. § 1.63(d)) (for continuation/divisional with Box 17 completed)		
i. <input type="checkbox"/> DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) Named in the prior application, see 37 C.F.R. §§1.63(d)(2) and 1.33(b).		
6. <input checked="" type="checkbox"/> Application Data Sheet. See 37 CFR 1.76		

17 If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:

☒ Continuation ☐ Divisional ☐ Continuation-in-Part (CIP) of prior application No: **10/008,604**Prior application information: Examiner **Jay L. Politzer** Group/Art Unit: **2856**

For CONTINUATION OR DIVISIONAL only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5c, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can be relied upon when a portion has been inadvertently omitted from the submitted application parts.

18. CORRESPONDENCE ADDRESS

☒ Customer Number or Bar Code Label

021569

or ☐ Correspondence Address below

(Insert Customer No. or Attach bar code label here)

Name			
Address			
City	State	Zip Code	
Country	Telephone	Fax	

Name	Donald R. McKenna	Registration No.	44,922
Signature	<i>Donald R. McKenna</i>	Date	12/5/03

CERTIFICATE OF EXPRESS MAILING under 37 CFR 1.10

Express Mail Label No:	EL544598935US	Date of Deposit	December 5, 2003
I hereby certify that this paper or fee is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 CFR 1.10 on the date indicated above and is addressed to the Commissioner for Patents, PO Box 1450, Alexandria, VA 22313-1450.			
Typed Name of Person Mailing Paper or Fee	Michelle Chan	Signature	<i>Michelle Chan</i>

16711 U.S. PTO
120503

(Modified) PTO/SB/17 (01-03)

FEE TRANSMITTAL for FY 2004

Patent fees are subject to annual revision

Complete if Known

Application Number	
Filing Date	H r with
First Named Inventor	Michael A. Spaid
Examiner Name	Jay L. Politzer
Group/Art Unit	2856
Attorney Docket No.	100/09431

TOTAL AMOUNT OF PAYMENT \$856

METHOD OF PAYMENT (check one)

☐ Check
 ☐ Credit Card
 ☐ Money Order
 ☐ Other

☒ Deposit Account:

Deposit
Account
Number
Deposit
Account
Name

03-0177

Caliper Technologies Corp.

The Commissioner is authorized to: (check all that apply)

☒ Charge fee(s) indicated below ☒ Credit any overpayments

☒ Charge any additional fee(s) during the pendency of this application

☐ Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account

FEE CALCULATION

1. BASIC FILING FEE

Large Fee Code	Entity Fee (\$)	Small Fee Code	Entity Fee (\$)	Fee Description	Fee Paid
1001	770	2001	385	Utility filing fee	770
1002	340	2002	170	Design filing fee	
1003	530	2003	265	Plant filing fee	
1004	770	2004	385	Reissue filing fee	
1005	160	2005	80	Provisional filing fee	
SUBTOTAL (1)					770

2. EXTRA CLAIM FEES

Total claims	Extra claims	Fee from below	Fee Paid
19 -20** = 0	x		
Independent Claims 4 -3** = 1		86	86
Multiple Dependent			

Large Fee Code	Entity Fee (\$)	Small Fee Code	Entity Fee (\$)	Fee Description
1202	18	2202	9	Claims in excess of 20
1201	86	2201	43	Independent claims in excess of 3
1203	280	2203	140	Multiple dependent claims, if new
1204	84	2204	42	**Reissue independent claims over original patent
1205	18	2205	9	**Reissue claims in excess of 20 and over original patent
SUBTOTAL (2) 86				

**or number previously paid, if greater; For Reissues, see above

FEE CALCULATION (continued)

3. ADDITIONAL FEES

Large Fee Code	Entity Fee (\$)	Small Fee Code	Entity Fee (\$)	Fee Description	Fee Paid
1051	130	2051	65	Surcharge - late filing fee or oath	
1052	50	2052	25	Surcharge - late provisional filing cover sheet	
1053	130	1053	130	Non-English specification	
1812	2520	1812	2520	For filing a request for <i>ex parte</i> reexamination	
1804	920*	1804	920*	Requesting publication of SIR prior to Examiner action	
1805	1840*	1805	1840*	Requesting publication of SIR after Examiner action	
1251	110	2251	55	Extension for response within first month	
1252	420	2252	210	Extension for response within second month	
1253	950	2253	475	Extension for response within third month	
1254	1480	2254	740	Extension for response within fourth month	
1255	2010	2255	1005	Extension for response within fifth month	
1401	330	2401	165	Notice of Appeal	
1402	330	2402	165	Filing a brief in support of an appeal	
1403	290	2403	145	Request for oral hearing	
1451	1510	1451	1510	Petition to institute a public use proceeding	
1452	110	2452	55	Petition to revive - unavoidable	
1453	1330	2453	665	Petition to revive - unintentional	
1501	1330	2501	665	Utility issue fee (or reissue)	
1502	480	2502	240	Design issue fee	
1503	640	2503	320	Plant issue fee	
1460	130	1460	130	Petitions to the Commissioner	
1807	50	1807	50	Petitions related to provisional applications	
1806	180	1806	180	Submission of Information Disclosure Stmt	
8021	40	8021	40	Recording each patent assignment per property (times number of properties)	
1809	770	2809	385	Filing a submission after final rejection (37 CFR 1.129(a))	
1810	770	2810	385	For each additional invention to be examined (37 CFR 1.129(b))	
1801	770	2801	385	Request for Continued Examination (RCE)	
1802	900	1802	900	Request for expedited examination of a design application	

Other fee (specify) _____


Other fee (specify) _____

SUBTOTAL (3) \$0

*Reduced by Basic Filing Fee Paid

SUBMITTED BY

Typed or Printed Name **Donald R. McKenna**

Signature 

Date **12/5/03**

Complete (if applicable)

Reg. Number **44,922**

Deposit Account User ID **03-0177**

CERTIFICATE OF EXPRESS MAIL under 37 CFR 1.10

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Date of Deposit **December 5, 2003**

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Signature 

Typed Name of Person Mailing Paper or Fee **Michelle Chan**